MINUTES NOVEMBER 17, 1999 EDUCATION/PERSONNEL VISION COMMITTEE

Members Present	Alternates Present	EMSA Staff Present
Debbie Becker	Bob O'Brien	Nancy Steiner
Sabina Imrie	Ken Miller, M.D.	Bev Skillicorn
Geoff Money		Connie Telford
Debi Moffat		
Bill Koenig, M.D.		
Leonard Inch		

Audience Members	Members Absent	Alternates Absent
Jan Ogar	Gloria Huerta	Ardith Hamilton
Brian Cotter	Sam Stratton, M.D.	Kevin White
Joanne Stonecipher	Carol Gunter	David Nevins
	Ryan Burgess	
	Lawson Stuart	
	Pat Kramm	
	Steve Maiero	

Future Meetings

- We will continue to meet upon adjournment of Commission on EMS meetings.
- It was decided that the full vision committee is allowed four face-to-face meetings and four conference calls consisting of 13 members and a two hour time frame.
- Subcommittees may have four conference calls consisting of six members for a duration of two hours.

Travel Reimbursement

- We will track the number and reimbursements for travel and ports in conference calls.
- Each member will need to go through Debbie for approval to travel or staff a conference call.
- After approval from the chair, contact Bev or Nancy for scheduling.

Discussion

- After discussion, we decided that we will utilize the format contained in Steve Andriese's matrix in development of our goals and objectives, i.e.:
 - -activity log
 - -estimated completion dates.

- Debbie will develop matrix for our committee and will e-mail to all members.
- Each subcommittee will use the matrix to develop their goals and objectives and will include an activity lead person.
- Action steps will include estimating a completion date for each objective and identifying links with other Vision Committees.

Priority Areas

Public Education Subcommittee

- Minutes from the conference call held by the Public Education subcommittee were passed out at the meeting.
- Jan Ogar suggested that at least one of the subcommittee's recommendations be reassigned to the Injury Prevention Vision Committee.

Interfacility and Critical Care Transport Subcommittee

- Dr. Koenig reported on the Critical Care/Interfacility Transport subcommittee. During his report, an in-depth discussion was held concerning which Vision Committee should have CCT/IFT as an issue. Evidently, concern was expressed by EMSAAC and EMDAC that this item does not belong in the Education/Personnel Vision Committee.
 - Leonard Inch suggested that the proposed 21 member CCT/IFT committee established by the "Watson Advisory Committee" be an advisory group to the Vision leads.
 - Jan Ogar suggested that during December when both the Watson Advisory Committee and the Vision leads will be meeting that this item be discussed and a decision made on where and to whom CCT/IFT recommendation should go.
- Dr. Koenig suggested that the subcommittee continue with this issue but will not go forward with sending out data request letters until a decision is made on which Vision committee will handle this subject.
- It was pointed out that CCT/IFT is a financial issue and involves all of the Vision Committees.
- The CCT/IFT subcommittee will continue to look at:
 - what is being done currently
 - who is doing it
 - what level of personnel is necessary
 - defining leaning objectives
 - curriculum development
 - how EMSA fits into CCT/IFT

Activities

- Debbie will bring to the attention of the Vision Committee leads during their conference call in December, the following:
- The need to put in place a clear process in flow of work to committees
- Assignments of CCT/IFT recommendations needs to be made, if leads agree that a change is necessary.
- Reassignment of injury prevention recommendation to the Injury Prevention Vision Committee or work together on this and public education recommendation.
- Debbie will e-mail the committee with the results of her discussion with the leads.